Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVS175AGC	A. BUILDING _____ B. WING _____	09/03/2008

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TOUCH OF LOVE 4	813 FAIRWAY DRIVE LAS VEGAS, NV 89107

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Y 000	Initial Comments This Statement of Deficiencies was generated as a result of the annual state licensure survey conducted in your facility on 9/03/08. The survey was conducted using Nevada Administrative Code (NAC) 449, Residential Facility for Groups Regulations, adopted by the Nevada State Board of Health on July 14, 2006. The facility was licensed for 6 total beds. The facility had the following category classified beds: 6 Category 1 beds The facility had the following endorsements: Residential facility for elderly or disabled persons Residential facility for persons with mental illnesses The census at the time of the survey was 5. Five resident files were reviewed and 4 employee files were reviewed. There were no complaints investigated during the survey. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The following regulatory deficiencies were identified:	Y 000		
Y 072 SS=E	449.196(3) Qualications of Caregiver-Med re-training	Y 072		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 072	Continued From page 1 NAC 449.196 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The caregiver must receive the training at least every 3 years and provide the residential facility with satisfactory evidence of the content of the training and his attendance at the training; and (b) At least every 3 years, pass an examination relating to the management of medication approved by the Bureau. This Regulation is not met as evidenced by: Based on review of the personnel records it was determined that the facility did not ensure that 2 of 4 caregivers had the required three hour medication management refresher training every three years. Findings include: Employee #1's file contained a medication administration certificate dated 7/29/05. The file did not contain evidence that the employee completed the required three hour medication refresher training, and had passed an examination relating to the management of medication. Employee #2's file contained a medication administration certificate dated 10/26/01. The file	Y 072		

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Y 072	Continued From page 2 did not contain evidence that the employee completed the required three hour medication refresher training, and had passed an examination relating to the management of medication. Severity: 2 Scope: 2	Y 072		
Y 250 SS=F	449.217(1) Kitchens-Equipment works; Clean and Sanitary NAC 449.217 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition. This Regulation is not met as evidenced by: Based on observation, record review and staff interview on 09/03/08, the facility failed to ensure the kitchen and the equipment were clean and allowed for the sanitary preparation of food. Findings include: There was a dog tray filled with dog food observed on top of the toaster oven located on the kitchen counter top. Severity: 2 Scope: 3	Y 250		

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Y 274	Continued From page 3	Y 274		
Y 274 SS=C	449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal. This Regulation is not met as evidenced by: Based on document review and interview the facility failed to ensure that the lunch that was served was the same as the one posted on the menu and that the substitution was posted in a conspicuous place during the meal. Findings include: When questioned what the residents had for lunch on 09/03/08, Employee #4 stated that he served "soup and bread". The posted menu indicated that the meal was to be burritos with vegies, salad, mushroom soup, juice and fruit. The facility lacked documented evidence of written menu substitutions. Severity: 1 Scope: 3	Y 274		
Y 444 SS=E	449.229(9) Smoke Detectors NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be	Y 444		

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Y 444	Continued From page 4 tested monthly. The results of the tests pursuant to this subsection must be recorded and maintained at the facility. This Regulation is not met as evidenced by: Based on observation, the facility failed to maintain smoke detectors in proper operating conditions at all times. Findings include: Observation On 9/03/08 while conducting the survey and tour of the facility, a chirping sound was heard coming from the smoke alarm in bedroom #4. The owner stated she would have the battery replaced. Severity: 2 Scope: 2	Y 444		
Y 881 SS=E	449.2742(6)(b) Medication / change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (b) Within 5 days after the change is ordered, a copy of the order or prescription signed by the physician must be included in the record maintained pursuant to paragraph (b) of	Y 881		

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Y 881	Continued From page 5 subsection 1 of NAC 449.2744. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure that the medication prescribed by a physician is administered as prescribed, and within 5 days after a change in the medication order, either in the amount or times the medication is to be given, there is a copy of the new order, or prescription, signed by the physician in the record maintained for the resident. Findings include: Record Review: Residents #1 and #3 were not receiving the correct doseage of two different medications. The physician's order for resident #1 stated Abilify 20mg at bedtime. The medication administration record (MAR) stated Abilify 15mg at bedtime. The medication being given to the patient was Abilify 15 mg. at bedtime according to the label on the medication bottle. The physician's order for resident #3 was Sertraline 100mg, 1 1/2 tabs (150mg) in the morning, according to the label on the bottle, the client was receiving Sertraline 50mg, 1 1/2 tabs (75mg) in the morning. The client's MAR stated what the physician's order said. Interview:	Y 881		

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Y 881	Continued From page 6 Employee #2 stated that the pharmacy had notified the facility that the prescription for client #1 had been changed. The MAR was changed, but the facility was unable to obtain a new order signed by the physician. Employee #2 stated that she would check with the pharmacy and the client's physician to determine the correct doseage of Sertraline. Severity: 2 Scope: 2	Y 881		
Y 899 SS=C	449.2744(2) Medication Administration NAC 449.2744 2. The administrator of the facility shall keep a log of caregivers assigned to administer medications that indicates the shifts during which each caregiver was responsible for assisting in the administration of medication to a resident. This requirement may be met by including on a resident's medication sheet an indication of who assisted the resident in the administration of the medication, if the caregiver can be identified from this indication. This Regulation is not met as evidenced by: Based on interview and record review there was no log kept of caregivers assigned to administer medications that indicates the shifts during which each caregiver was responsible for assisting in the administration of medication to a resident.	Y 899		

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Y 899	Continued From page 7 Findings include: Initials were on the medication administration record (MAR) of each resident's file, but there was no indication which initials belonged to which employee. Severity: 1 Scope: 3	Y 899		
Y1005 SS=D	449.2762(1) MR Training Requirements NAC 449.2762 1. Within 60 days after being employed by a residential facility for mentally retarded adults, a caregiver must receive not less than 4 hours of training related to the care of mentally retarded persons. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure that 2 of 4 caregivers employed longer than 60 days had received four hours of training concerning the care of residents with mental retardation. Finding include: The facility had an endorsement on its license to care for persons with mental retardation. The personnel files for Employee #3 and #4 lacked documented evidence of training related to the care of mentally retarded adults.	Y1005		

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Y1005	Continued From page 8 Severity: 2 Scope: 1	Y1005		
Y1010 SS=D	449.2764(1) MI Training NAC 449.2764 1. A person who provides care for a resident of a residential facility for persons with mental illnesses shall, within 60 days after he becomes employed at the facility, attend not less than 8 hours of training concerning care for residents who are suffering from mental illnesses. This Regulation is not met as evidenced by: Based on record review, the facility failed to ensure that 1 of 4 caregivers received eight hours of training concerning the care of residents with mental illnesses. Findings include: The facility had an endorsement on its license to care for residents with mental illnesses. The personnel files for Employee #4 lacked documented evidence of eight hours of training related to the care of persons with mental illnesses. Severity: 2 Scope: 1	Y1010		
YA106 SS=F	449.200(1)(2)(3)Personnel Files	YA106		

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YA106	Continued From page 9 NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (a) The name, address, telephone number and social security number of the employee; (b) The date on which the employee began his employment at the residential facility; (c) Records relating to the training received by the employee; (d) The health certificates required pursuant to chapter 441 of NAC for the employee; (e) Evidence that the references supplied by the employee were checked by the residential facility; and (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; and (b) Proof that the caregiver is 18 years of age or older. 3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of this facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the Bureau within 72 hours after the Bureau requests to review the files.	YA106		

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YA106	Continued From page 10 This Regulation is not met as evidenced by: Based on review of employee records, it was determined the facility failed to provide a complete file with mandatory requirements for 3 of 4 employees. Findings include: The file for Employee #1, hired 07/21/06, lacked documentation of 8 hours of annual training for 2007, a signed statement that they have read and understood the State regulations, evidence that the fingerprints were sent to Nevada Repository and results from the Nevada Repository. The file for Employee #3, hired 04/01/08, lacked documentation of an annual one step TB screening having been completed. The last annual one step was completed on 08/16/07. There was no evidence that the fingerprints were completed within 10 days of hire and sent to the Nevada repository. The file for Employee #4, hired 08/01/08, lacked documentation of the original two step TB screening test, a physician's statement, evidence that references were given and checked by the facility, a signed statement from the employee that they had read and understood the State regulations, and evidence that fingerprinting for criminal history results in accordance with NRS 449.176 - 449.185 was done and in the employees personnel file.	YA106		

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YA106	Continued From page 11 Severity: 2 Scope: 3	YA106		
YA870 SS=F	449.2742(1)(a-c) Medication Administration NAC 449.2742 1. The administrator of a residential facility that provides assistance to residents in the administration of medications shall: (a) Ensure that a physician, pharmacist or registered nurse who does not have a financial interest in the facility: (1) Reviews for accuracy and appropriateness, at least once every 6 months the regimen of drugs taken by each resident of the facility, including, without limitation, any over-the-counter medications and dietary supplements taken by a resident; and (2) Provides a written report of that review to the administrator of the facility; (b) Include a copy of each report submitted to the administrator pursuant to paragraph (a) in the file maintained pursuant to NAC 449.2749 for the resident who is the subject of the report; and (c) Make and maintain a report of any actions of any actions that are taken by the caregivers employed by the facility in response to a report submitted pursuant to paragraph (a). This Regulation is not met as evidenced by: Based on record review the administrator of the facility failed to ensure that a physician, pharmacist or registered nurse who does not have a financial interest in the facility reviews for	YA870		

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YA870	Continued From page 12 accuracy and appropriateness, at least once every 6 months the regimen of drugs taken by each resident of the facility, including, without limitation, any over-the-counter medications and dietary supplements taken by a resident. Findings include: Four (4) out of 5 resident's medication administration records (MAR) were not reviewed every six months on a regular basis by a physician, pharmacist or registered nurse. Severity: 2 Scope: 3	YA870		